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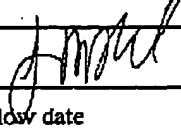
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/840,131	
	Filing Date	6 May 2004	
	First Named Inventor	M. IAMATTEO	
	Group Art Unit	1617	
	Examiner Name	S.M. HUI, Esq.	
Total Number of Pages in This Submission	3	Attorney Docket Number	Lifeline

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Election of Species
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Pharmaceutical Patent Attorneys, LLC 55 Madison Avenue, 4th floor, Morristown NJ 07960-7397 USA
Signature	
Date	see below date

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>see below date</u>	
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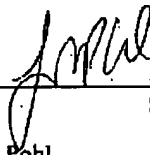
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Inventor : Matthew IAMATTEO
Serial No. : 10/840,131
Patent No. :
Filing Date : 6 May 2004
Title : *Premenstrual Dysphoric Disorder Medication*
Group Art : 1617
Examiner : San Ming HUI, Esq.

5

ELECTION

In response to the 14 July 2005 Restriction Requirement, Applicant here elects Class I
(claims 1 to 8 and 17 to 20).

10 The non-elected claims are process claims that depend from the elected product claims.
Applicant understands that these process claims may be rejoined as of right if presented prior to
final rejection or allowance (e.g., if presented at the present time).

=> Based on today's conference with the Examiner, Applicant understands that the
Examiner will *sua sponte* rejoin these non-elected claims prior to final rejection or allowance.

15 Respectfully submitted,

PHARMACEUTICAL PATENT ATTORNEYS, LLC

/s/

20 By Mark POHL, Reg. No. 35,325
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25 9 August 2005
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Morristown, NJ 07960-7397 USA

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